



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. E340264

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE #	14-01579		
LOCAL AGENCY CODING			
TOTAL # OF UNITS	03	OBJECT STRUCK	BOAT ON TRAILER ATTACHED TO U2

TRIBAL RESERVATION	
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M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION 07 - 08 - 2014	1618	31		0664

ON (PRIMARY TRAFFIC WAY) INTERSECTION <input type="checkbox"/> NON-INTERSECTION <input checked="" type="checkbox"/>	BLOCK NO. <input checked="" type="checkbox"/>	9200
SR 92	MILE POST <input type="checkbox"/>	

DISTANCE	OF (REFERENCE OR CROSS STREET)
60 00 MILES <input type="checkbox"/> N <input checked="" type="checkbox"/> E <input checked="" type="checkbox"/> S <input type="checkbox"/> W	LAKE DRIVE

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4253506815
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LAST NAME	CLARK	FIRST NAME	KATIE	MIDDLE INITIAL	M
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STREET NEW ADDRESS	10214 MOUNTAIN LOOP HWY
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CITY	GRANITE FALLS	ST	WA	ZIP	98252
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	CLARKKM181PT	STATE	WA	SEX	F	D.O.B.	MMDDYYYY	10	30	1982
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	ALB1387	STATE	WA	VIN#	1J4GZ58Y1RC187816
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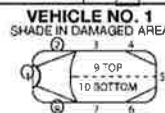
TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	1994	MAKE	JEEP	MODEL	JPCH	STYLE		VEHICLE TOWED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOWED BY	SPEEDWAY TOW-RESCUE	GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. KATIE CLARK 10214 MOUNTAIN LOOP HWY GRANITE FALLS WA 98252

LIABILITY INSURANCE IN EFFECT <input type="checkbox"/>	INSURANCE CO & POLICY #	CITATION #	4Z0633158	CHARGE	NO INSURANCE/FOLLOW TOO
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL-CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	PHONE
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LAST NAME	DAVIS	FIRST NAME	TOM	MIDDLE INITIAL	D
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STREET NEW ADDRESS	5705 69TH ST NE
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CITY	MARYSVILLE	ST	WA	ZIP	98258
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CDL	RESTRICTIONS	B	ENDORSEMENTS	O
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DRIVER'S LICENSE #	DAVISTD634NK	STATE	WA	SEX	M	D.O.B.	MMDDYYYY	08	12	1937
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	B09950F	STATE	WA	VIN#	1N6AA07C48N359218
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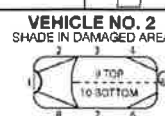
TRAILER PLATE #	4347XW	STATE	WA	TRAILER PLATE #		STATE	
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VEH. YEAR	2008	MAKE	NISS	MODEL	TITPU	STYLE		VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. TOM DAVIS 5705 69TH ST NE MARYSVILLE WA 98270

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	FARMERS 189331027	CITATION #		CHARGE	
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VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
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OFFICER'S NAME (PRINT)	W. AUKERMAN	BADGE OR ID #	72	AGENCY	WA0311900
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STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO. E340264

CASE #

14-01579

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)	DAVIS ELIZABETH M																	
ADDRESS & PHONE #	5705 69TH ST NE MARYSVILLE WA 98258 3606584386										SEX	F	D.O.B. MMDDYYYY	05	-	12	-	1937
PASSENGER <input checked="" type="checkbox"/> WITNESS <input type="checkbox"/>	UNIT #	2	SEAT POS.	3	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	2	INJURY CLASS	1	NATURE OF INJURIES			
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #											SEX		D.O.B. MMDDYYYY		-		-	
PASSENGER <input type="checkbox"/> WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES			
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #											SEX		D.O.B. MMDDYYYY		-		-	
PASSENGER <input type="checkbox"/> WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES			

NARRATIVE

On 07/08/2014 at about 1620 hours (all times approximate) Officer Adams and I were working as a two officer patrol unit (FTO unit) and were patrolling in the area of SR 92 and Lake Drive, in the city of Lake Stevens, when we came upon an unreported vehicle collision (non-blocking/non-injury) which involved two vehicles; one vehicle was towing a 20 foot boat on a trailer.

We contacted the driver's of both vehicles; one vehicle had a single passenger. At the time of the collision no persons involved in the collision claimed any type of injury.

Based on evidence and statements at the scene of the collision it is found that U2 (which was towing a 20 foot boat on a trailer and also having a female passenger) had been traveling westbound on SR 92 approaching the intersection of Lake Drive. U1 had also been traveling westbound on SR 92, behind U2, and was also approaching the intersection of Lake Drive. The driver of U2 claimed he was slowing due to a large box style type vehicle slowing ahead which was intending to turn left (southbound) onto Lake Drive. As U2 slowed, U1 failed to observe the slowing vehicles and rear end the 20 foot boat on the trailer which was attached to U2. The collision scene occurred about 60 feet to the east of Lake Drive on SR 92. The boat, boat motor and boat trailer sustained the majority of impact/damage as a result of the vehicle collision.

U1 and the boat/trailer combination were towed from the scene. Speedway Towing arrived on the scene to tow both vehicles with the assistance of Rescue Towing. Rescue Towing towed U1 and Speedway Towing towed the boat and trailer combination.

At about 1737 hours the collision scene was cleared up and law enforcement cleared the scene.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

W. AUKERMAN

07-09-14 01:05 PM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

ROBERT MINER 095

DATE

7/9/2014 1:23:24 PM

BADGE OR ID #	72	ORI #	WA0311900	TIME POLICE DISPATCHED	4:20 PM	TIME POLICE ARRIVED	4:20 PM
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**SUPPLEMENTAL  
POLICE TRAFFIC  
COLLISION REPORT**



013197

**REPORT NO.** E340264

**CASE #** 14-01579

**COMMERCIAL MOTOR CARRIER**

INTERSTATE ☐ INTRASTATE ☐

**UNIT #** ☐ **USDOT** ☐ **ICC #** ☐ **VEHICLE TYPE** ☐ **CARGO BODY TYPE** ☐

**CARRIER NAME**

**CARRIER ADDRESS**

**CITY**

**ST**

**ZIP**

**NAME SOURCE**

**# AXLES**

**GVWR**

**PLACARD**

**+**

**NAME IF NO NUMBER**

**ADDITIONAL UNITS**

**UNIT #** 3 **MOTOR VEHICLE** ☐ **PEDAL-CYCLE** ☐ **PEDESTRIAN** ☐ **PROPERTY OWNER** ☒ **DAMAGE THRESHOLD MET** YES ☒ NO ☐ **PHONE** D: 3606584386

**LAST NAME** DAVIS **FIRST NAME** TOM **MIDDLE INITIAL** D

**STREET NEW ADDRESS** 5705 69TH ST NE

**CITY** MARYSVILLE **ST** WA **ZIP** 98258

**CDL** ☐ **RESTRICTIONS** ☐ **ENDORSEMENTS** ☐

**DRIVER'S LICENSE #** ☐ **STATE** ☐ **SEX** M **D.O.B.** 08 - 12 - 1937

**ON DUTY** ☐ **STATUS** ☐ **AIRBAG** ☐ **RESTR.** ☐ **EJECT** ☐ **HELMET USE** ☐ **INJURY CLASS** ☐ **NATURE OF INJURIES** ☐

**LICENSE PLATE #** ☐ **STATE** ☐ **VIN#** ☐

**TRAILER PLATE #** ☐ **STATE** ☐ **TRAILER PLATE #** ☐ **STATE** ☐

**VEH. YEAR** ☐ **MAKE** ☐ **MODEL** ☐ **STYLE** ☐ **VEHICLE TOWED** YES ☐ NO ☐ **TOWED BY** ☐ **GOVT. VEHICLE** YES ☐ NO ☐

**REGISTERED OWNER INFO.**

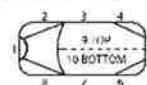
**LIABILITY INSURANCE IN EFFECT** ☐ **INSURANCE CO. & POLICY #** ☐

**VEHICLE LEGALLY STANDING** YES ☐ NO ☐

**CITATION #**

**CHARGE**

**SHADE IN DAMAGED AREA**



**UNIT #** ☐ **MOTOR VEHICLE** ☐ **PEDAL-CYCLE** ☐ **PEDESTRIAN** ☐ **PROPERTY OWNER** ☐ **DAMAGE THRESHOLD MET** YES ☐ NO ☐ **PHONE** ☐

**LAST NAME** ☐ **FIRST NAME** ☐ **MIDDLE INITIAL** ☐

**STREET NEW ADDRESS**

**CITY** ☐ **ST** ☐ **ZIP** ☐

**CDL** ☐ **RESTRICTIONS** ☐ **ENDORSEMENTS** ☐

**DRIVER'S LICENSE #** ☐ **STATE** ☐ **SEX** ☐ **D.O.B.** ☐ - ☐ - ☐

**ON DUTY** ☐ **STATUS** ☐ **AIRBAG** ☐ **RESTR.** ☐ **EJECT** ☐ **HELMET USE** ☐ **INJURY CLASS** ☐ **NATURE OF INJURIES** ☐

**LICENSE PLATE #** ☐ **STATE** ☐ **VIN#** ☐

**TRAILER PLATE #** ☐ **STATE** ☐ **TRAILER PLATE #** ☐ **STATE** ☐

**VEH. YEAR** ☐ **MAKE** ☐ **MODEL** ☐ **STYLE** ☐ **VEHICLE TOWED** YES ☐ NO ☐ **TOWED BY** ☐ **GOVT. VEHICLE** YES ☐ NO ☐

**REGISTERED OWNER INFO.**

**LIABILITY INSURANCE IN EFFECT** ☐ **INSURANCE CO. & POLICY #** ☐

**VEHICLE LEGALLY STANDING** YES ☐ NO ☐

**CITATION #**

**CHARGE**

**SHADE IN DAMAGED AREA**



I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

**W. AUKERMAN**

**07-09-14 01:05 PM**

**INVESTIGATING OFFICER'S SIGNATURE** ☐ **UNIT OR DIST DET** ☐

**DATED:**

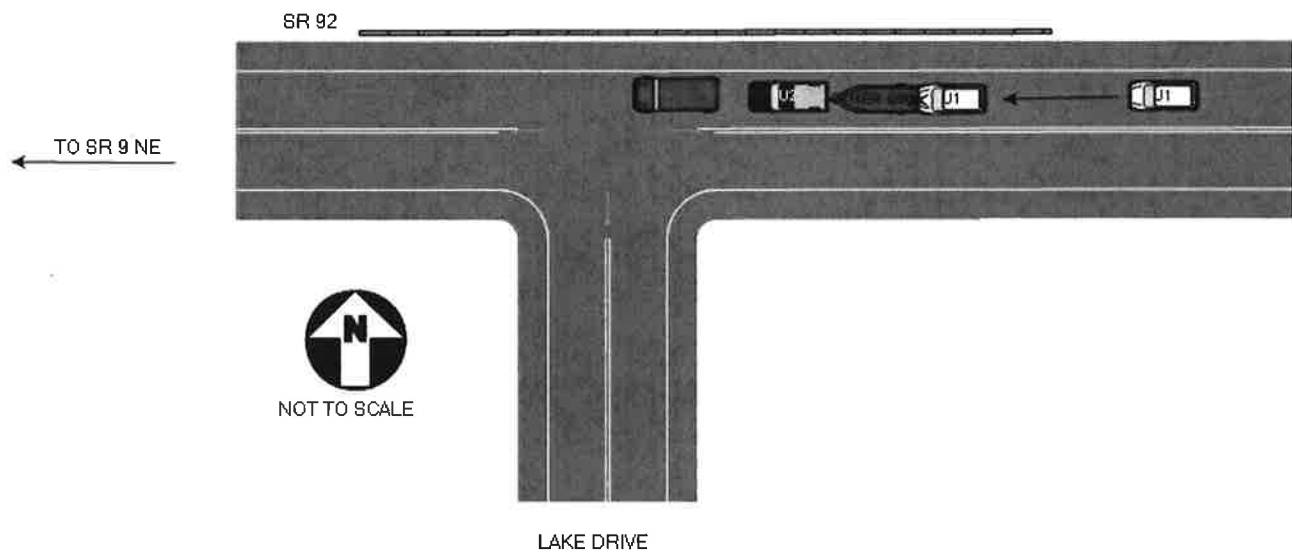
**PLACE SIGNED**

**BADGE OR ID #** 72 **ORI #** WA0311900

**APPROVED BY** MINER

**DATE** 7/9/2014

**PAGE** 3 **OF** 4



INFRACITION ☒ TRAFFIC ☐ NON-TRAFFIC L.E.A. ORI # WA0311900

COURT ORI # WA03119VB

INFRACITION # 420633158

REPORT # 14-01579

IN THE ☐ DISTRICT ☒ MUNICIPAL COURT OF  
☐ STATE OF WASHINGTON ☐ COUNTY OF

LAKE STEVENS VIOLATION BUREAU  
 THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF WASHINGTON

PLAINTIFF VS. NAMED DEFENDANT

DRIVER'S LICENSE NO. (SCANNED)  
 CLARKKM181PT

STATE WA EXPIRES 10-30-17  
 PHOTO ID MATCHED ☒ YES ☐ NO  
 NAME LAST CLARK

FIRST KATIE

MIDDLE MARIE

SFX

CDL ☐ YES ☒ NO

ADDRESS 10214 MOUNTAIN LOOP HWY

CITY GRANITE FALLS

STATE WA

ZIP CODE 98252

EMPLOYER

DATE OF BIRTH 10-30-82

RACE W

SEX F

HEIGHT 5'07"

WEIGHT 175

EYES BLU

HAIR

RESIDENTIAL PHONE NO.

CELL/PAGER PHONE NO. (425)350-6815

WORK PHONE NO.

VIOLATION DATE 07/08/2014 16:20

INTERPRETER NEEDED

ATTORNEY

REF. TRAFFICWAY

LAKE DRIVE

SR 92

MAP

BLOCK # 9200

CITY/COUNTY OF

LAKE STEVENS/SNOHOMISH

VEHICLE NO ALB1387

STATE WA

EXPIRES 03-09-15

VEH YR 1994

MAKE JEEP

MODEL JPC

STYLE

COLOR WHITE

TR #1 LIC NO

STATE

EXPIRES

TR YR

TR #2 LIC NO

STATE

EXPIRES

TR YR

OWNER/COMPANY IF OTHER THAN DRIVER

CITY

STATE

ZIP CODE

ACCIDENT NO INJURY

VEHICLE

YES

16+ PASS

HAZMAT

YES

EXEMPT

FIRE

VEHICLE

LEA

VEH SPEED

IN A

ZONE

SMD

PAGE

AIRCRAFT

OP MOT VEH W/OUT INS

DID THEN AND THERE COMMIT EACH OF THE FOLLOWING OFFENSES

1. VIOLATIONS STATUTE CODE 46.30.020

OP MOT VEH W/OUT INS

PENALTY \$ 550.00

2. VIOLATIONS STATUTE CODE 46.61.145

RESULT IN COLLISION

PENALTY \$ 175.00

3. VIOLATIONS STATUTE CODE

FOLLOWING TOO CLOSE

PENALTY \$

4. VIOLATIONS STATUTE CODE

PENALTY \$

5. VIOLATIONS STATUTE CODE

PENALTY \$

RELATED #

DATE ISSUED 07-08-14

TOTAL PENALTY \$ 725.00

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT I HAVE ISSUED THIS ON THE DATE AND AT THE LOCATION ABOVE, THAT I HAVE PROBABLE CAUSE TO BELIEVE THE ABOVE NAMED PERSON COMMITTED THE ABOVE OFFENSE(S), AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.

OFFICER W. AUKERMAN

# 72

OFFICER

☒ TICKET SERVED ON VIOLATOR  
☐ TICKET SENT TO COURT FOR MAILING

☐ TICKET REFERRED TO PROSECUTOR

NOTICE OF INFRACITION  
 This is a non-criminal offense for which you cannot go to jail.  
 YOU MUST RESPOND WITHIN FIFTEEN (15) DAYS FROM THE DATE ISSUED.  
 Your response must be postmarked by midnight of the day it is due at the court.  
 If you do not respond or appear for court hearings:

TRAFFIC  
 The court will find that you committed the infracition.  
 You may lose your driver's license privilege.  
 Your penalty will be increased.  
 Failure to pay may result in a referral of your case to a collection agency.

NON-TRAFFIC  
 The court will find that you committed the infracition.  
 It is a crime and will be treated accordingly.  
 Your penalty may be increased.  
 Failure to pay may result in a referral of your case to a collection agency.

Check one of the 3 boxes to the right, sign, date, and mail this form to:

Court contact information:  
 Phone 1: (425)334-1072

LAKE STEVENS VIOLATION BUREAU  
 PO BOX 257  
 LAKE STEVENS WA 98258

My mailing address is: (PLEASE PRINT)  
 Name: \_\_\_\_\_  
 Street or PO Box \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_  
 Apt: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_  
 Work: \_\_\_\_\_  
 Is interpreter needed? Language: \_\_\_\_\_  
 X: \_\_\_\_\_

(SIGNATURE): \_\_\_\_\_  
 PAGE 1 OF 1

INFRACITION # 420633158 LSP 11

CLARK, KATIE M 103082

## EXCHANGE OF INFORMATION

OFFICER NAME: **W. AUKERMAN #72**  
AGENCY: **LAKE STEVENS PD**

COLLISION: **07/08/14 04:18 PM**  
DISPATCH: **07/08/14 04:20 PM**  
ARRIVAL: **07/08/14 04:20 PM**

CASE#: **14-01579**  
LOCATION: **SR 92 BN:9200**  
**AT LAKE DRIVE**

NARRATIVE/NOTES:

UNIT 1:	<b>MOTOR VEHICLE -</b>	1994 JEEP JPCH PLATE: ALB1387 (WA)	TOWED BY: <b>SPEEDWAY</b>
DRIVER: <b>KATIE M CLARK</b>		VEH OWNER: <b>KATIE M CLARK</b>	
ADDRESS: <b>723 55TH ST SW UNIT A EVERETT, WA 982033046</b>		ADDRESS: <b>10214 MOUNTAIN LOOP HWY GRANITE FALLS, WA 98252</b>	
DL #: <b>CLARKKM181PT</b>		STATE: <b>WA</b>	
PHONE:		PHONE:	
ALT PHONE:		ALT PHONE:	
INSURED BY:		INSURED BY:	
POLICY #:		POLICY #:	
UNIT 2:	<b>MOTOR VEHICLE -</b>	2008 NISSAN TITPU PLATE: B09950F (WA)	TOWED BY:
DRIVER: <b>TOM D DAVIS</b>		VEH OWNER: <b>TOM DAVIS</b>	
ADDRESS: <b>5705 69TH ST NE MARYSVILLE, WA 98258</b>		ADDRESS: <b>5705 69TH ST NE MARYSVILLE, WA 98270</b>	
DL #: <b>DAVISTD634NK</b>		STATE: <b>WA</b>	
PHONE:		PHONE:	
ALT PHONE:		ALT PHONE:	
INSURED BY: <b>FARMERS</b>		INSURED BY: <b>FARMERS</b>	
POLICY #: <b>189331027</b>		POLICY #: <b>189331027</b>	

# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

14-01579

### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) DAVIS Tom D.	RACE W	ETH	SEX M	DOB 8-12-77	AGE 36	HGT 6	WGT	HAIR	EYES
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STREET ADDRESS	CITY	STATE	ZIP	RES. STATUS
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HOME PHONE 360-658 4386	CELL PHONE 360 720-404	PLACE OF EMPLOYMENT Retired
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WORK PHONE	EMAIL ADDRESS Tom and eli @ Hornumri.com
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I, Tom Davis, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY : (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

We were traveling west on Highway 92  
towing our 1998 Volvo boat 20'. We slowed  
down for a left turning Fed-Ex delivery truck  
when we were struck from behind by Katie Clark  
driving a 1994 Jeep. Extensive damage to boat  
motors

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Tom Davis</u>	DATE SIGNED 7/8/14	LOCATION SIGNED
OFFICER/NUMBER:	DATE SIGNED	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE \_\_\_ OF \_\_\_

# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

14-01579

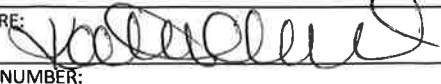
### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Clark Katie Marie	RACE WA	ETH	SEX F	DOB 10/20/1984	AGE 31	HGT	WGT	HAIR	EYES
STREET ADDRESS 10214 Mountain Loop Hwy		CITY Granite Falls		STATE WA		ZIP 98092		RES. STATUS		
HOME PHONE 425-350-6815		CELL PHONE 425-350-6815		PLACE OF EMPLOYMENT Albertsons						
WORK PHONE		EMAIL ADDRESS								

I, Katie Clark, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY : (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I Katie Clark was driving east on Hwy 92 following a truck with a boat and trailer when all the sudden traffic stopped quickly and I had to slam on my breaks not having enough time to stop at my front end of my. I kept hit the back of the Boat trailer hitting the motor and causing an accident.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 7/8/14	LOCATION SIGNED
OFFICER/NUMBER:	DATE SIGNED	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE \_\_\_ OF \_\_\_



LAKE STEVENS POLICE EVIDENCE UNIT <i>Vehicle Collision</i>		Primary Officer/Badge Number <i>N. Adams #127</i>		Case Number <i>14-01579</i>	
Type of Crime: <del>Felony</del> / Misdemeanor (Circle)		Type of Case: <i>Vehicle Collision</i>		Date/Time: <i>7/8/14 1827 hrs</i>	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evidence will be held until court disposition or when the Statute of Limitations has expired *Found and Safekeeping will be held for 60 days or 60 days past owner notification			
Item # <i>1</i>	Item <i>CD-RW</i>	Brand Name <i>Compucessory</i>		Storage Location	Disposition
Action # <i>3</i>	Brand/Model/Caliber <i>(Further Description)</i>				
	Serial #	Where Found <i>SR 92 / Lake Dr</i>	Weight of Narcotic		
Owner's Name _____ Address _____ City _____ State _____ Zip _____ Phone # _____				Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions <i>PICS #127</i>					
Item #	Item	Brand Name		Storage Location	Disposition
Action #	Brand/Model/Caliber <i>(Further Description)</i>				
	Serial #	Where Found	Weight of Narcotic		
Owner's Name _____ Address _____ City _____ State _____ Zip _____ Phone # _____				Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions					
Item #	Item	Brand Name		Storage Location	Disposition
Action #	Brand/Model/Caliber <i>(Further Description)</i>				
	Serial #	Where Found	Weight of Narcotic		
Owner's Name _____ Address _____ City _____ State _____ Zip _____ Phone # _____				Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions					
Item #	Item	Brand Name		Storage Location	Disposition
Action #	Brand/Model/Caliber <i>(Further Description)</i>				
	Serial #	Where Found	Weight of Narcotic		
Owner's Name _____ Address _____ City _____ State _____ Zip _____ Phone # _____				Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions					
Item #	Item	Brand Name		Storage Location	Disposition
Action #	Brand/Model/Caliber <i>(Further Description)</i>				
	Serial #	Where Found	Weight of Narcotic		
Owner's Name _____ Address _____ City _____ State _____ Zip _____ Phone # _____				Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions					

**Evidence Control Use Only:**

Received by Evidence:	NCIC/WACIC <input checked="" type="checkbox"/>	Date:	CAD/RMS Checked	ROUTING: _____
Name: _____ # _____	NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File

/1620	(SP0274)	\$OUTSRV		, NO MORE INFORMATION
/1620		DISPOS	19D1	#SS72 AUKERMAN, OFFICER (WAYNE) #SS127 ADAMS, OFFICER (NATHAN) , NO MORE INFORMATION
/1620		CHANGE		LOC: SR 92/LAKE DR --> LAKE DR/SR 92 , LKS, BLK: --> SS001
/1620		ASSTER	19D2	[LAKE DR/SR 92 , LKS] #SS115 THOR, OFFICER (ANDREW)
/1621	(SP0319)	SUPP		NAM: FEM RP, ADR: OL WPH2 COF 21, PHO: 3607204604, TXT: CC, NON-INJ, RP STATED LKS PD OS, HU.
/1623	(SP0333)	ONSCNE	19D2	
/1625	(SS95 )	*ASST	19S13	[LAKE DR/SR 92 , LKS] #SS95 MINER, SGT (ROBERT)
/1625		*ONSCNE	19S13	
/1629	(SS72 )	REMINQ	19D1	MDTWANT, CLARK, KATIE, M, 103082, ,, WA, ,,,,,,,,,,
/1630		REMINQ	19D1	MDTVEH, ALB1387, ,, WA, ,,,,,,,,,,
/1630		*MISC	19D1	, NO INS U1 425-350-6815
/1630		REMINQ	19D1	MDTWANT, DAVIS, TOM, D, 081237, ,, WA, ,,,,,,,,,,
/1631		REMINQ	19D1	MDTVEH, B09950F, ,, WA, ,,,,,,,,,,
/1631		REMINQ	19D1	MDTVEH, 4347XW, ,, WA, ,,,,,,,,,,
/1632		REMINQ	19D1	MDTBOAT, ,,, WN7179RH, ,,,,,,
/1632		*MISC	19D1	, FARMERS #189331027
/1633	(SP0333)	ASNCAS	19D1	\$SS14001579
/1636		ROTREQ	19D1	TOW 5348 LKS SPEEDWAY TOWING INC 3605635630 , 1 FLATBED
/1638		MISC	19D1	, SPEEDWAY ENRT FOR ALL VEHS, JEEP, AND VEH PULLI NG 20 FT BOAT
/1639	(SS72 )	REMINQ	19D1	MDTBOAT, ,,, WN7179RH, ,,,,,,
/1640	(SP0333)	REMINQ	19D1	BOAT, 19D1, ,,, WN7179RH, ,,,,,,,,,,
/1640		REMINQ	19D1	BOAT, 19D1, , , X, WN7179RH, ,,,,,,,,,, 0
/1714		\$PREMPT	19D1	
/1718	(SP0274)	ASSTOS	19D1	[LAKE DR/SR 92 , LKS] #SS72 AUKERMAN, OFFICER (WAYNE) #SS127 ADAMS, OFFICER (NATHAN)
/1721	(SS95 )	CLEAR	19S13	
/1721	(SS115 )	CLEAR	19D2	
/1723	(SS72 )	*MISC	19D1	, 60' EAST OF LAKE DR ON SR 92 WESTBOUND
/1737	(SP0333)	CLEAR	19D1	D/H
/1737		CLOSE	19D1	